

**National Park Service  
Gulf Islands National Seashore  
Application for Special Use Permit**

Please supply the information requested below. Attach additional sheets if necessary. Allow at least four (4) business days for processing. A non-refundable processing cost of \$50.00 (payable to the NPS) must accompany this application unless the requested use is an exercise of a First Amendment right. You will be notified of the disposition of the application and the necessary steps to secure your final permit. (Note: there may be additional fees charged, and you may be required to provide proof of liability insurance.)

Applicant Name: \_\_\_\_\_ Organization Name: \_\_\_\_\_  
Social Security #: \_\_\_\_\_ Tax ID #: \_\_\_\_\_  
Street/Address: \_\_\_\_\_ Street/Address: \_\_\_\_\_  
City/State/Zip Code: \_\_\_\_\_ City/State/Zip Code: \_\_\_\_\_  
Telephone #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Telephone #: \_\_\_\_\_ Cell# \_\_\_\_\_  
Fax #: \_\_\_\_\_ Fax #: \_\_\_\_\_  
Description of Proposed Activity: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Requested Location: (please be specific) \_\_\_\_\_ Date (s): \_\_\_\_\_

Event set up will begin at	Event will begin at	Event will end at	Removal will be done at
(give time)	(give time)	(give time)	(give time)

Maximum # of Participants: \_\_\_\_\_ Maximum # of Vehicles: \_\_\_\_\_

Support Equipment (generators, amplification, decorations, chairs, tables, tents, etc): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Support Personnel (contractors, suppliers, caterers, musical groups, etc, include address and phone numbers): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Individual in charge of event on site (include address, telephone and cell phone numbers): \_\_\_\_\_  
\_\_\_\_\_

Is this an exercise of First Amendment Rights?	Y	N
Are you familiar with/ have you visited the requested area?	Y	N
Do you plan to advertise or issue a press release?	Y	N
Will you distribute printed material?	Y	N
Is there any reason to believe there will be attempts to disrupt, protest or prevent your event?(if yes explain on separate sheet)	Y	N

The applicant by his or her signature certifies that all of the information given is complete and correct, and that no false or misleading information or false statements have been given.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The Information you provide will be used to determine whether a permit will be issued. The completed application must be accompanied by an application fee in the form of a cashiers check or money order in the amount of \$50, made payable to the NPS. Application an administrative charges are non-refundable.

**Note:** This is an application only and does not serve as permission to conduct a special event or any other use of Gulf Islands National Seashore. If your request is approved, a permit containing applicable conditions and regulations will be sent to the person designated on the application. The permit must be signed and returned to the park prior to the event.

**Paperwork Reduction Act Statement:** This information is being collected to allow the park manager to make a valued judgment on whether or not to allow the requested use. All applicable parts of the form must be completed. An agency may not conduct or sponsor and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number.

**Estimated Burden Statement:** Public reporting burden for this form is estimated to average 30 minutes per response including the time it takes to read, gather and maintain data, review instructions and complete the form. Direct comments regarding this burden estimate or any aspects of this form to the National Park Service Program Manager, Special Park Uses, 1849 C Street, NW (2460), Washington, D.C. 20240.

Thank you for completing this application form. Return this application to:

Florida District  
Gulf Islands National Seashore  
Special Use Permit Coordinator  
1801 Gulf Breeze Parkway  
Gulf Breeze, FL 32563  
Phone (850) 934-2624  
Fax (850) 934-2653

Mississippi District  
Gulf Islands National Seashore  
Special Use Permit Coordinator  
3500 Park Road  
Ocean Springs, MS 39564  
Phone (228) 875-3962  
Fax (228) 872-2954